Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

		S	SMALL ENTITY			OTHER THAN						
			(Column 1)		(Column 2)		1	TYPE		OR	SMALL ENTITY	
-TOTAL CLAIMS								RATE -	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		* \$			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =		* 9⁄			X42=		OR	X84=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, ente	r "0" in c	"0" in column 2		TOTAL		OR	TOTAL	
	С	LAIMS AS A	MENDED - PART II							OTHER	THAN	
		(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- OL AUA		Ιſ	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			ODII. FEE			ADDII. 1 CE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	HEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1 f	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						┚┞			UI 1		
								+140=		OR	+280=	
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	•
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	•
	Independent	*	Minus	***		<u> </u>	1	X42=		OR	X84=	
	FIRST PRESE	CLAIM		┚┝	+140=			+280=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR		
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	aid For IN THI	S SPACE i	is less than	n 20, enter "20.	. * Al	DDIT. FEE		OR	TOTAL ADDIT. FEE	<u> </u>
		ber Previously Pai					er four	nd in the app	ropriate box	in col	lumn 1.	

FORM PTO-875 (Rev. 8/01)